



CITY OF

**GROVELAND**

ESTABLISHED 1922

CITY OF GROVELAND  
156 S. LAKE AVENUE  
GROVELAND, FL 34736

PHONE 352-429-2141  
FAX 352-429-3852

## SPECIAL EVENT PERMIT

**PER ORDINANCE 2010-04-11**

*An application for a SPECIAL EVENT PERMIT shall be filed not less than 21 days  
before the date on which the event is scheduled to take place.*

### ORGANIZATION HEAD QUARTERS

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone # \_\_\_\_\_

### REPRESENTATIVE

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone# \_\_\_\_\_

### APPLICANT (If Different):

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_

Type of Event: Parade \_\_\_\_\_ Ceremony \_\_\_\_\_ Exhibition \_\_\_\_\_ Show \_\_\_\_\_  
Concert \_\_\_\_\_ Demonstration \_\_\_\_\_ Other \_\_\_\_\_

Date (s) and time (s) scheduled: \_\_\_\_\_

Nature and types of activities: \_\_\_\_\_

Approximate number of spectators and participants: \_\_\_\_\_

Purpose of special event: \_\_\_\_\_

Exact location of event: \_\_\_\_\_

Designation of public facilities or equipment to be used: \_\_\_\_\_

Number of temporary directional signs: \_\_\_\_\_

Copy of State Permit if State roadway is used: \_\_\_\_\_ YES \_\_\_\_\_ NO

**FOR PARADE:**

Exact location of marshaling and staging area: \_\_\_\_\_  
\_\_\_\_\_

Time at which units of parade will begin to arrive: \_\_\_\_\_

Time at which units of parade will be dispensed: \_\_\_\_\_

Exact route to be traveled shown on attached map: \_\_\_\_\_ YES \_\_\_\_\_ NO

Please attach approximate # of person, animals, & vehicles participating with description of types of animals and vehicles.

Parade will occupy all of the width of the street, roadway, or sidewalk: \_\_\_\_\_ YES \_\_\_\_\_ NO

**FOR FIREWORKS:**

The following shall be attached to this application:

- 1) A detailed listing of the type & quantity of fireworks to be used.
- 2) A detailed written statement outlining all appropriate safety procedures, which will be used at fireworks display in order to protect the safety of the public and all, surrounding property.
- 3) A detailed written statement describing what facilities and containers will be used to store fireworks.
- 4) If applicable, applicants federal license # for transporting fireworks across state line; and
- 5) A detailed list of names, addresses, occupations, and backgrounds of all individuals who will be responsible for the actual display, use or explosion of any fireworks. The backgrounds statement should include a complete history of the experience of the individuals involved with respect to their use to fireworks, including a detailed list and explanation of each and every accident resulting from the use of fireworks, which the individual has been responsible for, or involved in.
- 6) A map showing exact launches point and area of fallout.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_  
APPROVED \_\_\_\_\_ DISAPPROVED \_\_\_\_\_ Conditions for permit attached  
Police Chief: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_  
APPROVED \_\_\_\_\_ DISAPPROVED \_\_\_\_\_ Conditions for permit attached  
Fire Chief: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_  
APPROVED \_\_\_\_\_ DISAPPROVED \_\_\_\_\_ Conditions for permit attached  
City Manager: \_\_\_\_\_ Date: \_\_\_\_\_